|  |                               |                                   |                   | Application or Docket Number |            |                     |                        |
|--|-------------------------------|-----------------------------------|-------------------|------------------------------|------------|---------------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECOR   |                               |                                   |                   | 1046, 1236/2011              |            |                     |                        |
| CLAIMS AS FILED - PART I<br>(Column 1) (Column 2)  |                               | SMALI                             | SMALL ENTITY TYPE |                              | OTHER THAN |                     |                        |
| TOTAL CLAIMS 37  | ·                             |                                   | RAT               | E FEE                        | 7          | RATE                | FEE                    |
| FOR  | NUMBER FILED                  | NUMBER EXTRA                      | BASIC             | FEE 355.00                   | OR         | BASIC FEE           | · 710.00               |
| TOTAL CHARGEABLE CLAIMS 39 minus 20=   |                               | . 19                              | X\$ 9             | X\$ 9=                       |            | X\$18=              | 342                    |
| INDEPENDENT CLAIMS 3 minus 3 o   |                               | · Ø                               | X40               | X40=                         |            | X80=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |                               |                                   |                   | OR                           |            |                     |                        |
| " If the difference in column 1 is less than zero, enter "O" in column 2   |                               |                                   | +135              |                              | OR         | +270=               |                        |
| 7-20-GLAIMS AS AMENDED - PART II   |                               |                                   |                   | 4                            | JOR        | TOTAL               | 1052                   |
| (Column 1) (Column 2) (Column 3)   |                               |                                   | SMAI              | LENTITY                      | OR         | SMALL I             |                        |
| CLAINS REMARKING AFTER AMENDMENT  Total . 33  Independent . 3  | HIGH<br>NUM<br>PREVIX<br>PAID | BER PRESENT<br>DUSLY EXTRA<br>FOR | RATI              | ADDI-<br>TIONAL<br>FEE       |            | RATE                | ADDI-<br>TIONAL<br>FEE |
| Total · 33   | Minus -3                      | •                                 | X\$ 8             | ,                            | OR         | X\$18=              |                        |
| EDST DESCRIPTION OF M  | Minus                         | 5 -                               | X40-              |                              | OR         | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                               |                                   |                   | 7                            | OR         | +270=               |                        |
| 222 5  |                               |                                   | 101               |                              |            | TOTAL               |                        |
| 2-22-05 (Column 1) (Column 2) (Column 3)   |                               |                                   | ADOM. F           | EE L                         | OR         | ADDIT. FEE          |                        |
| CLAIMS   | HEER                          | EST                               | <b> </b>          | ADDI-                        | 1          |                     | ADDI-                  |
|  | NUM<br>PREVIO                 | DUSLY EXTRA                       | RATE              |                              |            | RATE                | TIONAL                 |
| AFTER AMENDIALENT Total . 33 Independent . 3   | Minus                         | 9 -                               | X\$ 9.            |                              | OR         | X\$18=              |                        |
| FIRST PRESENTATION OF ME   |                               | 3                                 | X40=              |                              | OR         | X80=                |                        |
| THE THE SECTION OF IE  | OLTO CE OCT ENDERY            | COCKS .                           | +135-             |                              | OR         | +270=               |                        |
| 10.7/1-05  |                               | -                                 | ADDIT, FI         |                              | OR         | YOTAL<br>ADDIT, FEE |                        |
| (Column 2) (Column 3)  |                               |                                   |                   |                              |            |                     |                        |
| CLAIMS REMAINING AFTER AMENDMENT   | HIGH<br>NUM<br>PREVIO<br>PAID | BER PRESENT<br>SUSLY EXTRA        | RATE              | ADDI-<br>TIONAL<br>FEE       |            | RATE                | ADDI-<br>TIONAL<br>FEE |
| Total . 33   | Minus -3                      | 3 . 0                             | X\$ 9=            |                              | OR         | X\$18=              |                        |
| Independent  -   | Minus 3                       | GARY (C)                          | X40=              |                              | OR         | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                               |                                   |                   |                              | OR         | +270=               |                        |
| " If the entry in extern 1 is tess than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |                               |                                   |                   | T.                           | OR         | TOTAL               |                        |
| The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT, FEE  |                               |                                   |                   |                              |            |                     |                        |

FORM PTO-075 (Rev. 900)

Petent and Trademati Office, U.S. DEPARTMENT OF COMMERCE
U.S. OPO: 2000-460-766/20103